

| POSITION            | INITIALS | ID NO. | DATE    |
|---------------------|----------|--------|---------|
| FEE DETERMINATION   | PS       | 66621  | 9/14    |
| O.I.P.E. CLASSIFIER |          | 43     | 9/15/99 |
| FORMALITY REVIEW    | BTI      | 60245  | 9-21-99 |

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

| Claim    | Date       |
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| Final    |            |
| Original |            |
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| 7        | 10/19/2003 |
| 8        | 10/19/2003 |
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| 11       | 10/19/2003 |
| 12       | 10/19/2003 |
| 13       | 10/19/2003 |
| 14       | 10/19/2003 |
| 15       | 10/19/2003 |
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| 50       | 10/19/2003 |

| Claim    | Date |
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| 148      |      |
| 149      |      |
| 150      |      |

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If more than 150 claims or 10 actions  
 staple additional sheet here

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